Effective October 1, 2000 09/925362													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL E	YTITY	OR	OTHER		2412
TOTAL CLAIMS			27					RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE		
TOTAL CHARGEABLE CLAIMS			27 minus 20=		• 7			X\$ 9=		OR			÷
INDEPENDENT CLAIMS			3 minus 3 =					X40=		OR	Y22		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+135=		OR			
* If the difference in column 1 is less than zero, enter "0" in column 2										OR		,	
CLAIMS AS AMENDED - PART II								TOTAL	<u> </u>	.	OTHER	THAN	
_	Qo.	·(Column 1)		(Colu		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	# X 4
AMENDMENT A		CLAIMS REMAINING AFTER		HIGH NUM PREVIO	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL] -	RATE .	ADDI- TIONAL	
	Total ====================================	- AMENDMENT	Minis-z-	PAID	FOR	27:	1	- X\$ 9==	FEE		35.5	FEE 3	
	Independent	12	Minus	***	3	- Q		X40=	T ST	OR	X86=	406.W	F
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							7403	÷	OR	-A00#	1 /4.11	
1	Fondt					÷	•	+135=		OR	+270=	- *	
.7	2-30	74	-					YOYAL ADDIT, FEE		OR	TOTAL ADDIT: FEE	1,260.00	
	10	(Column 1)	•	(Colu		(Column 3)	_	. :			(F.S.)		
AMENDMENT B.		CLAIMS : REMAINING F. AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		PATE	ADDI- TIONAL	
	Total	18	Minus		54	= Ø		X\$ 9=	ree	OR	X\$18 ≑	EEE.	100 N
MEN	Independent	• 3	Minus	•••	a	= ()		X40=	X	OR	X80=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT	CLAIM		•	+135=			+270=	/	Y
								TOTAL	_	QR OC	TOTAL		
	•	(Column 1)		(Colur	mn 3)	(Column 3)	•	AODIT. FEE		OR	ADDIT. FEE	A	
ſ.,		CLAIMS		HIGH	EST		1 1		4001	1 1			
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total		Minus	••		-		X\$ 9=		OR	X\$18=	ĭ	
ME	Independent	•	Minus	***		*		X40=	•	OR	X86-		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									υ π		•	
If the entry in column 1 is less than the entry in column 2, write '0' in column 3.												,	
"If the entry in column 1 is less than the entry in column 2, write 10 in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE OR ADDIT. FEE													
	The "Highest Num	ber Previously Pa	id For (Total o	Independ	ent) is the	highest numbe	ır fou	ind in the app	ropriata bo	r in col	luma 1.		

. . **Application or Docket Number**